TOWN OF ELSMERE 2010 RENTAL PERMIT APPLICATION

No	No		Rental Property Address:	Property Owner:			
s	s		Street Address	First Name	Midd	lle Last	
Yes	Yes		City State Zip	-			
file	file	;	Tax Parcel Number	Owners Home Address			
I/on	(On)	Date:_	Type of Property:	-			
ovideo	vided/		Single Family Home Apartment	City	State	Zip	
Vehicle Info Provided/on file	Lease copy Provided/On file		Business Other Number of Units:	Business Phone Numb	er	Home Phone Nu	ımber
Ve	Ľ		Residential Commercial Total				
		Code Official:	Management Company (if applicable): Name: Representative:				
			Address:	_			
CIAL USE ONLY Method of payment: Cash Check #:	ᇴ		City/State/Zip: Elsmere License Number:				
	Lic. No. Issued:		Unit Number: Date of occupancy (Month/Year):				
			Primary Occupants Name:	Home Phone:	Bus Pl	none:	
USE of payn			Total Number of Occupants: Bedrooms: Bathrooms: Total Square Footage:				
L	Ö	e Off	Additional units require a separate application				
(IA)	er II	Cod	READ THIS				
OFFICIAL Method	Customer ID:		A copy of the lease or agreement between the tenant and owner of each rental unit and a copy of the registration and color of all vehicles that will be kept at the property, or a statement indicating the unit is vacant must accompany this application.				
			Complete This Section for Commercial Rentals				
	By:		Business Name of Primary Occupants:		Bus Phone:		
			Type of Business:				
Received by:			Name of Business Owner:				
eive	ij	(u	Business Owners Home Address:				
Rec	Date checked:	reaso		Total Square Footage of Struc			
	te ch	ED (Additional units require a separate application				
	Delinquent Dat	NOT APPROVED (reason).	A copy of the lease or agreement between the tenant and owner of each rental unit must be included				
Date paid:	x Check: OK	APPROVED	I hereby certify that the information contained in this further certify that I am aware that I am required to information occur.		Elsmere should any		
Dat	Tax	AP	Owner's Signature		Date		